



PTO/SB/21 (09-04)

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/811,228
Filing Date	March 26, 2004
First Named Inventor	GIFFORD, HANSON
Art Unit	3738
Examiner Name	Unassigned
Attorney Docket Number	022128-000400US

**ENCLOSURES (Check all that apply)**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Return Postcard<br>International (PCT) Search Report<br>PTO/SB/08A and /08B Form<br>0 Reference Copies |
|---|---|---|

Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
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**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Scott M. Smith		
Date	12/7/04	Reg. No.	48,268

**CERTIFICATE OF TRANSMISSION/MAILING**

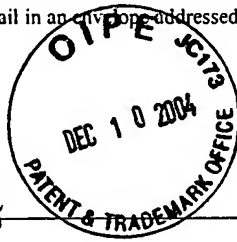
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Signature			
Typed or printed name	Tiffany Wu	Date	12/7/04

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Attorney Docket No.: 022128-000400US

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On 12/7/04

TOWNSEND and TOWNSEND and CREW LLP

By: [Signature]  
Tiffany Wu

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

GIFFORD et al.

Application No.: 10/811,228

Filed: March 26, 2004

For: METHODS AND APPARATUS  
FOR TREATMENT OF PATENT  
FORAMEN OVALE

Examiner: Unassigned

Art Unit: 3738

INFORMATION DISCLOSURE  
STATEMENT UNDER 37 CFR §1.97 and  
§1.98

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are not enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

Also enclosed is a copy of the Search/Examination report corresponding to the PCT application.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

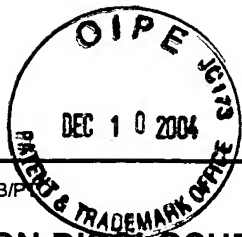
Applicant believes that no fee is required for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Scott M. Smith  
Reg. No. 48,268

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<b>Substitute for form 1449B/P</b>  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (use as many sheets as necessary)			<b>Complete if Known</b>		
			Application Number	10/811,228	
			Filing Date	March 26, 2004	
			First Named Inventor	GIFFORD, HANSON	
			Art Unit	3738	
			Examiner Name	Unassigned	
Sheet	3	of		Attorney Docket Number	022128-000400US

U.S. PATENT DOCUMENTS+					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code <sup>2</sup> (if known)			
	AA	US-2001/0037129	11-01-2001	Thill	
	AB	US-2003/0045893	03-06-2003	Ginn	
	AC	US-2003/0050665	03-13-2003	Ginn	
	AD	US-5,370,675	12-06-1994	Edwards et al.	
	AE	US-5,500,012	03-19-1996	Brucker et al.	
	AF	US-5,507,744	04-16-1996	Tay et al.	
	AG	US-5,919,200	04-16-1996	Holman et al.	
	AH	US-6,056,760	05-02-2000	Kishigami et al.	
	AI	US-6,401,720	06-11-2002	Gifford et al.	
	AJ	US-6,482,224	11-19-2002	Homma et al.	
	AK	US-6,702,835	03-09-2004	Ginn	

FOREIGN PATENT DOCUMENTS							
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup>	Number <sup>4</sup> Kind Code <sup>5</sup> (if known)				
	AL	WO	98/07375	02-26-1998	Homma et al.		<input type="checkbox"/>
	AM	WO	03/053493	07-03-2003	Chanduszko et al.		<input type="checkbox"/>
	AN	WO	03/082076	10-09-2003	Callaghan et al.		<input type="checkbox"/>
							<input type="checkbox"/>

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>

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Examiner Signature		Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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